

Approved For Release 2002/06/10 : CIA-RDP64-00360R000400090049261
IC VOUCHER FOR PURCHASES AND
SERVICES OTHER THAN PERSONAL Bu. Vou. No. _____

U. S. COST REIMBURSABLE

(Department, bureau, or establishment)

Voucher prepared at _____ (Give place and date)

THE UNITED STATES, Dr.,

Payee's Account No. 1014

To _____ (Payee)

PAID BY

SAPC 6503
COPY 1 OF 3

No. and Date of Order	Date of Delivery or Service	ARTICLES OR SERVICES (Enter description, item number of contract or Federal supply schedule, and other information deemed necessary) Discount Terms	QUANTITY	UNIT PRICE		AMOUNT	
				Cost	Per	Dollars	Cts.
		Costs				9,115	26 ✓
Use continuation sheet(s) if necessary						Total	9,115 26 ✓

PAYMENT:

Complete ☐
Partial ☐
Final ☐

Shipped from _____ to _____ Weight _____ Government B/L No. _____

I certify that the above bill is correct and just and that payment has not been received.

(Payee must NOT use this space)
Differences _____

STATINTL (Sign original only)

Date 5-

Per _____

Amount verified; correct for
(Signature or initials) 9/115 26

Contract No. A101

Date _____

Req. No. _____

Date _____

Invoice Rec'd.

Pursuant to authority vested in me, I certify that this account is correct and proper for payment.

† Appr _____

By _____

Title _____

SIGN
ORIGINAL
ONLY

STATINTL

Title _____

Date _____

STATINTL

THE REVERSE OF THIS FORM MUST BE EXECUTED WHEN PURCHASES ARE MADE OR SERVICES SECURED WITHOUT WRITTEN AGREEMENT IN ANY FORM

ACCOUNTING CLASSIFICATION (Appropriation Symbol must be shown; other classification optional)

Approving Officer

STATINTL

Paid by { Check No. _____ dated _____, 19____, for \$ _____ } on Treasurer of the United States in favor of payee named above.
Cash, \$ _____, on _____, 19____. Payee _____ (Sign original only)

* When a voucher is signed or receipted in the name of a company or corporation, the name of the person writing the company or corporation must be written in the space provided for the signature of the person writing the company or corporation, per John Smith, Secretary, or Treasurer, as the case may be.
† If the ability to certify and authority to approve are combined in one person, one signature only is necessary; otherwise the approving officer will sign on the line below "Approved for \$ _____", and over his official title.

Per _____
Title _____
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STATINTL

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ACCOUNTS PAID REPORTS

☐ DIVISIONAL DETAIL ACCOUNTS PAID JOURNAL										☐	☐ CONSOLIDATED ACCOUNTS PAID DISTRIBUTION					DATE REPORT NO.	
COST CENTER			DATE			CHECK NUMBER	PAYEE'S (ABBREV.) NAME	PURCHASE ORDER OR INVOICE NUMBER	RECEIVING REPORT NUMBER	C.E.L. CODE	CHARGE DISTRIBUTION				DISTRIBUTION AMOUNT		
MAJ	INT	SUB	MO	DAY	YR						ACCOUNT	M.J.O.	S.O.	WORK ORDER			
250000	04	166	24018	H I / G	517807	21495	5	12700	5022	29					4356		
															4356		
															4356		
250000	04	196	24388	NEWARK	512730	22249	5	12700	5022	42					478		
															478		
															478		
250000	04	166	24100	WCO ELEC	517213	22029	5	12700	5022	54					3980		
															3980		
															3980		
250000	04	206	24481	BULOVA	517604	21552	5	12700	5022	67					7500		
250000	04	176	24219	LELAND	517612	20877	5	12700	5022	67					132480		
															132480		
250000	04	166	24074	MOD PATT	518016	22121	5	12700	5022	68					5519		
															5519		
															5519		
250000	04	176	24219	LELAND	517611	20876	5	12700	5022	77					2760		
															2760		
															2760		
															2760		

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